

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/518 791	
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEF.	IND.	DEF.	IND.	DEF.
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TOTAL IND.	7		↓		↓	↓
TOTAL DEF.	38	←	←	←	←	←
TOTAL CLAIMS	45					

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
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100						
TOTAL IND.			↓		↓	↓
TOTAL DEF.			←		←	←
TOTAL CLAIMS						